

# ISSUE SLIP STATEMENT (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SC		1-35-99
O.L.P.E. CLASSIFIER		59	127
FORMALITY REVIEW		71555	2-5-99

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	9/01
2	2/02
3	3/02
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Claim	Date
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ST AVAILABLE COPY If more than 150 claims or 10 actions  
 staple additional sheet here

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